

IMPORTANT CONFIDENTIALITY NOTICE

The documents accompanying this telecopy transmission contain confidential information belonging to the sender which is legally protected. The information is intended only for the use of the individual or entity named below. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this telecopied information is strictly prohibited. If you have received this telecopy in error, please immediately notify us by telephone (collect) to arrange for return of the telecopied document to us.

TO: Luan Kim Bui - United States Patent and Trademark Office

Fax No. 571-273-8300

Phone No. 571-272-4552

RECEIVED
CENTRAL FAX CENTER

MAR 26 2007

FROM: Pam Lolli (Typed or printed name of person signing Certificate)

Fax No. 513-626-1355

Phone No. 513-626-1673

Application No.: 10/812,659

Inventors: Hector Manuel Brignoni et al.

Filed: March 30, 2004

Docket No.: 9574

Confirmation No.: 3397

FACSIMILE TRANSMITTAL SHEET AND
CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on March 26, 2007, to the above-identified facsimile number.

 (Signature)

Listed below are the item(s) being submitted with this Certificate of Transmission: **

- 1) Fee Transmittal
- 2) Reply - 10 pages
- 3)
- 4)
- 5)

Number of Pages Including this Page: 12

Comments:

**Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

FEES TRANSMITTAL for FY 2007 <small>Patent fees are subject to annual revision. Effective December 8, 2004</small>		Complete if Known	
		Application Number	10/812,659
		Confirmation Number	3397
		Filing Date	March 30, 2004
		First Named Inventor	Hector Manuel Brignoni et al.
		Examiner Name	Laun Kim Bui
Art Unit	3728	RECEIVED	
TOTAL AMOUNT OF PAYMENT (\$)	9574	CENTRAL FAX CENTER	

MAR 26 2007

METHOD OF PAYMENT			FEES CALCULATION (continued)																																								
<p>1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:</p> <p>Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company</p>			<p>5. ADDITIONAL FEES</p> <table border="0"> <thead> <tr> <th style="text-align: left;"><u>Fee Description</u></th> <th style="text-align: right;"><u>Fee Paid</u></th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td> <td style="text-align: right;">(\$120) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td style="text-align: right;">(\$450) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td style="text-align: right;">(\$1,020) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4th month</td> <td style="text-align: right;">(\$1,590) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5th month</td> <td style="text-align: right;">(\$2,160) <input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td style="text-align: right;">(\$180) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(i) Late Oath/Declaration (nonprovisional)</td> <td style="text-align: right;">(\$130) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17(q) Surcharge - Late provisional filing fee or cover sheet</td> <td style="text-align: right;">(\$50) <input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td style="text-align: right;">(\$130) <input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td style="text-align: right;">(\$500) <input type="checkbox"/></td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td style="text-align: right;">(\$500) <input type="checkbox"/></td> </tr> <tr> <td>Request for oral hearing</td> <td style="text-align: right;">(\$1,000) <input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td style="text-align: right;">(\$1,370) <input type="checkbox"/></td> </tr> <tr> <td>Other: _____</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> </tbody> </table>		<u>Fee Description</u>	<u>Fee Paid</u>	Extension for reply within 1 st month	(\$120) <input type="checkbox"/>	Extension for reply within 2 nd month	(\$450) <input type="checkbox"/>	Extension for reply within 3 rd month	(\$1,020) <input type="checkbox"/>	Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>	Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>	Information Disclosure Statement fee	(\$180) <input type="checkbox"/>	37 CFR 1.16(i) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>	37 CFR 1.17(q) Surcharge - Late provisional filing fee or cover sheet	(\$50) <input type="checkbox"/>	Non-English specification	(\$130) <input type="checkbox"/>	Notice of Appeal	(\$500) <input type="checkbox"/>	Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>	Request for oral hearing	(\$1,000) <input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) <input type="checkbox"/>	Other: _____	<input type="checkbox"/>									
<u>Fee Description</u>	<u>Fee Paid</u>																																										
Extension for reply within 1 st month	(\$120) <input type="checkbox"/>																																										
Extension for reply within 2 nd month	(\$450) <input type="checkbox"/>																																										
Extension for reply within 3 rd month	(\$1,020) <input type="checkbox"/>																																										
Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>																																										
Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>																																										
Information Disclosure Statement fee	(\$180) <input type="checkbox"/>																																										
37 CFR 1.16(i) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>																																										
37 CFR 1.17(q) Surcharge - Late provisional filing fee or cover sheet	(\$50) <input type="checkbox"/>																																										
Non-English specification	(\$130) <input type="checkbox"/>																																										
Notice of Appeal	(\$500) <input type="checkbox"/>																																										
Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>																																										
Request for oral hearing	(\$1,000) <input type="checkbox"/>																																										
Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) <input type="checkbox"/>																																										
Other: _____	<input type="checkbox"/>																																										
<p>2. BASIC FILING FEE - Large Entity</p> <table border="0"> <thead> <tr> <th style="text-align: left;"><u>FILING</u></th> <th style="text-align: left;"><u>SEARCH</u></th> <th style="text-align: left;"><u>EXAMINATION</u></th> </tr> <tr> <th style="text-align: left;"><u>Fee</u></th> <th style="text-align: left;"><u>Fee</u></th> <th style="text-align: left;"><u>Fee</u></th> </tr> </thead> <tbody> <tr> <td>Application</td> <td></td> <td></td> </tr> <tr> <td>Type</td> <td></td> <td style="text-align: right;">Fee Paid</td> </tr> <tr> <td>Nonprovisional (\$300)</td> <td>(\$500)</td> <td>(\$200)</td> </tr> <tr> <td>Utility</td> <td></td> <td style="text-align: right;">(Total = \$1000) <input type="checkbox"/></td> </tr> <tr> <td>Design</td> <td>(\$200)</td> <td>(\$100)</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;">(\$130) <input type="checkbox"/></td> </tr> <tr> <td>Reissue</td> <td>(\$300)</td> <td>(\$500)</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;">(\$600) <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;">(Total = \$1400) <input type="checkbox"/></td> </tr> <tr> <td>Provisional Utility filing fee</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;">(Total = \$200) <input type="checkbox"/></td> </tr> </tbody> </table>			<u>FILING</u>	<u>SEARCH</u>	<u>EXAMINATION</u>	<u>Fee</u>	<u>Fee</u>	<u>Fee</u>	Application			Type		Fee Paid	Nonprovisional (\$300)	(\$500)	(\$200)	Utility		(Total = \$1000) <input type="checkbox"/>	Design	(\$200)	(\$100)			(\$130) <input type="checkbox"/>	Reissue	(\$300)	(\$500)			(\$600) <input type="checkbox"/>			(Total = \$1400) <input type="checkbox"/>	Provisional Utility filing fee					(Total = \$200) <input type="checkbox"/>		
<u>FILING</u>	<u>SEARCH</u>	<u>EXAMINATION</u>																																									
<u>Fee</u>	<u>Fee</u>	<u>Fee</u>																																									
Application																																											
Type		Fee Paid																																									
Nonprovisional (\$300)	(\$500)	(\$200)																																									
Utility		(Total = \$1000) <input type="checkbox"/>																																									
Design	(\$200)	(\$100)																																									
		(\$130) <input type="checkbox"/>																																									
Reissue	(\$300)	(\$500)																																									
		(\$600) <input type="checkbox"/>																																									
		(Total = \$1400) <input type="checkbox"/>																																									
Provisional Utility filing fee																																											
		(Total = \$200) <input type="checkbox"/>																																									
<p>3. APPLICATION SIZE FEE:</p> <p>Sheets of Spec and Drawings <input type="checkbox"/> (\$230 for each 50 sheets in excess of 100, except for sequence and program listings)</p> <p>SUBTOTAL (2)+(3) (\$) <input type="checkbox"/></p>																																											
<p>4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</p> <table border="0"> <thead> <tr> <th style="text-align: left;"><u>Extra</u></th> <th style="text-align: left;"><u>Fee from</u></th> <th style="text-align: left;"><u>Fee</u></th> </tr> <tr> <th style="text-align: left;"><u>Claims</u></th> <th style="text-align: left;"><u>Below</u></th> <th style="text-align: left;"><u>Paid</u></th> </tr> </thead> <tbody> <tr> <td>Total Claims [19] - 20** = [0]</td> <td>× [50]</td> <td>= [0]</td> </tr> <tr> <td>Independent Claims [3] - 3** = [200]</td> <td>× [0]</td> <td>= [0]</td> </tr> <tr> <td>Multiple Dependent claims: [360]</td> <td>= [0]</td> <td></td> </tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see below</p> <p>Fee Description</p> <p>Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) ** Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) ** Reissue claims: each claim over 20 and more than original patent (\$50 per claim)</p> <p>SUBTOTAL (4) (\$) <input type="checkbox"/></p>			<u>Extra</u>	<u>Fee from</u>	<u>Fee</u>	<u>Claims</u>	<u>Below</u>	<u>Paid</u>	Total Claims [19] - 20** = [0]	× [50]	= [0]	Independent Claims [3] - 3** = [200]	× [0]	= [0]	Multiple Dependent claims: [360]	= [0]		SUBTOTAL (5) (\$) <input type="checkbox"/>																									
<u>Extra</u>	<u>Fee from</u>	<u>Fee</u>																																									
<u>Claims</u>	<u>Below</u>	<u>Paid</u>																																									
Total Claims [19] - 20** = [0]	× [50]	= [0]																																									
Independent Claims [3] - 3** = [200]	× [0]	= [0]																																									
Multiple Dependent claims: [360]	= [0]																																										

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Idris N. McKelvey	Registration No. (Attorney/Agent)	57,057	Telephone (313) 626-0552
Signature			Date	March 26, 2007

+ This collection of information is required by 37 CFR 1.77. Information is needed to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Fee Transmittal doc (Revised for P&G use 04/25/2006)

RECEIVED
CENTRAL FAX CENTER

MAR 26 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/812,659
Inventors : Hector Manuel Brignoni et al.
Filed : March 30, 2004
Art Unit : 3728
Examiner : Luan Kim Bui
Docket No. : 9574
Confirmation No. : 3397
Customer No. : 27752
Title : Packaged Article Comprising a Lenticular Label

REPLY AFTER 1ST OFFICE ACTION UNDER 37 CFR §1.111(b)

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450
Dear Sir:

This paper is being filed in response to the Office Action of December 26, 2006. Thus, timely response is provided up to and including March 26, 2007. Reconsideration is respectfully requested in light of the remarks contained herein.

Listing of the Claims begin on page 2 of this paper.

Remarks begin on page 6 of this paper.